

**OFFICE OF THE CHILD ADVOCATE  
PERFORMANCE AUDIT  
MARCH 2002**

**DEPARTMENT OF ADMINISTRATION  
BUREAU OF AUDITS  
ONE CAPITOL HILL  
PROVIDENCE, RI 02908-5889**



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

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OFFICE OF THE CHILD ADVOCATE  
PERFORMANCE AUDIT

**EXECUTIVE SUMMARY**

The Office of the Child Advocate has implemented 4 of the 5 recommendations cited in our report issued December 1998.

Consideration should be given to having an information system needs assessment and developing a management information system in conjunction with DCYF. Improvement of this nature would benefit other Child Advocate activities such as Medicaid billings, case management, night-to-night monitoring, as well as facilities monitoring and investigations. Improving the system will assure management that the data generated from the system is valid and reliable and can be used as a basis to ensure that the Office of the Child Advocate is operating economically and efficiently.

OFFICE OF THE CHILD ADVOCATE  
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**TABLE OF CONTENTS**

	<u>Page</u>
<b>EXECUTIVE SUMMARY .....</b>	<b>i</b>
<b>TRANSMITTAL LETTER .....</b>	<b>1</b>
<b>INTRODUCTION</b>	
Objectives, Scope, and Methodology .....	2
Background .....	2
Organizational Chart .....	3
<b>STATUS OF PRIOR AUDIT RECOMMENDATIONS .....</b>	<b>4</b>
<b>FINDINGS AND RECOMMENDATIONS:</b>	
Management Information System .....	5
Surrogate Parent Program .....	6
Training .....	6
<b>MANAGEMENT’S RESPONSE TO AUDIT</b>	
<b>FINDINGS AND RECOMMENDATIONS.....</b>	<b>7</b>



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March 20, 2002

Ms. Laureen D'Ambra, Child Advocate  
Office of the Child Advocate  
272 West Exchange Street, Suite 301  
Providence, RI 02903

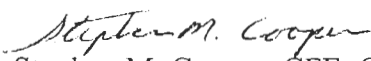
Dear Ms. D'Ambra:

We have completed our audit of the Office of the Child Advocate for the fiscal period ended June 30, 2001. Our audit was conducted in accordance with Sections 35-7-3 and 35-7-4 of the R.I. General Laws.

The findings and recommendations included herein have been discussed with management and we have considered their comments in the preparation of the report.

In accordance with Section 35-7-4 of the R.I. General Laws, we will review the status of the Office of the Child Advocate's corrective action plan within 6 months from the date of issue of this report.

Sincerely,

  
Stephen M. Cooper, CFE, CGFM  
Chief, Bureau of Audits

SMC(SME):pp

# OFFICE OF THE CHILD ADVOCATE PERFORMANCE AUDIT

## INTRODUCTION

### Objectives, Scope, and Methodology

We conducted a performance audit of the Office of the Child Advocate for the fiscal year ended June 30, 2001. Our objectives were to determine if the Office of the Child Advocate complied with state laws and regulations and was providing child advocate services in an economical and efficient manner.

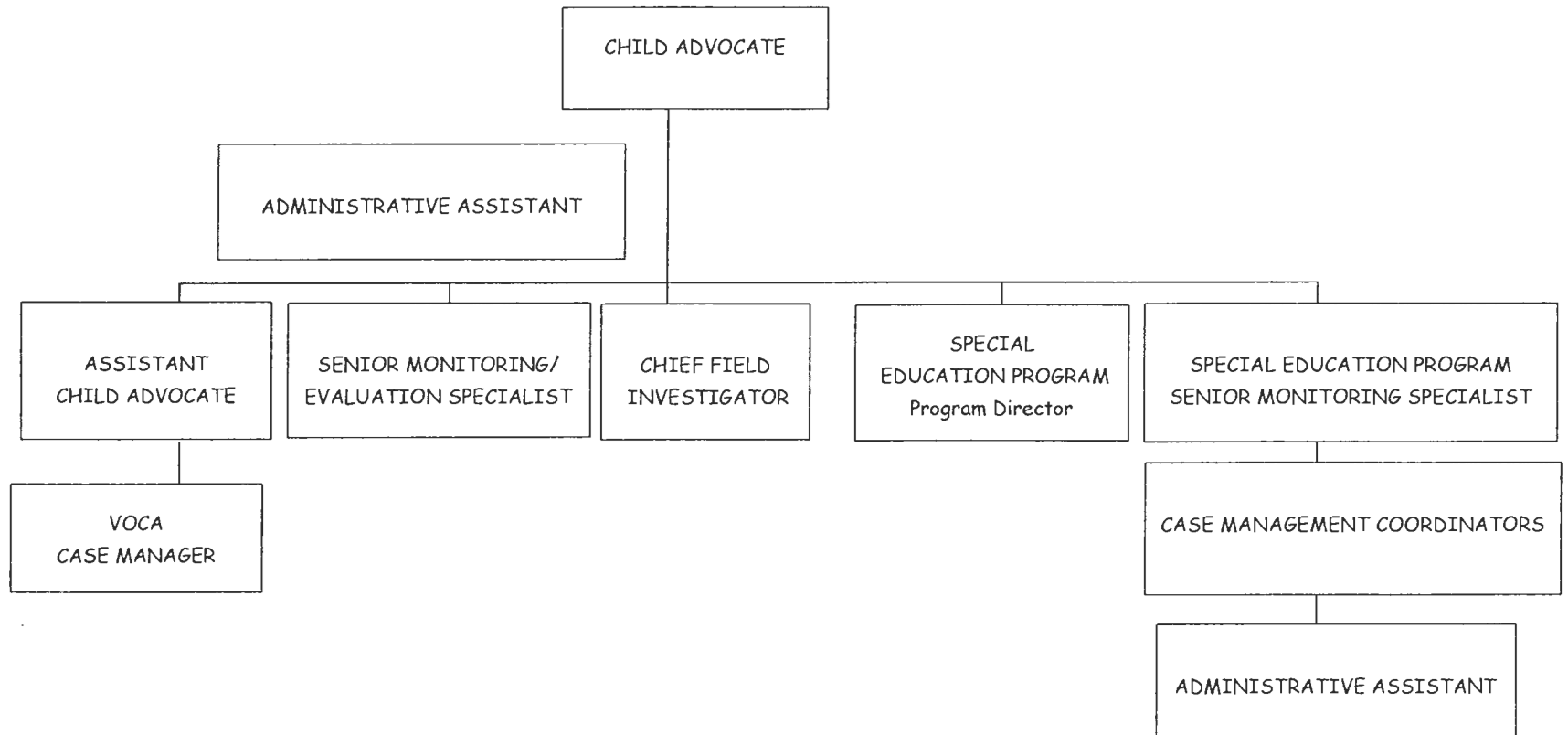
Our audit was made in accordance with the *Standards for the Professional Practice of Internal Auditing* issued by the Institute of Internal Auditors. In conducting our audit, we evaluated the practices and procedures used by the Office of the Child Advocate in administering its operations. Our purpose was to identify practices and procedures that could be improved or made more efficient, and to identify any significant non-compliance with applicable state or federal laws. To achieve our objectives, we reviewed relevant policies and procedures, state laws and regulations, interviewed responsible personnel, and performed tests of the records and such auditing procedures as we considered necessary in the circumstances.

The findings and recommendations included herein have been discussed with management and we have considered their comments in the preparation of our report. Section 35-7-4 (c) of the R.I. General Laws requires the auditee to respond within 60 days to all recommendations in the report. Management's response to our audit findings and recommendations were submitted on March 12, 2002 and are included in this report.

### Background

The Office of the Child Advocate was created as an autonomous agency by the General Assembly in 1980. The establishment, powers, and duties are codified in Title 42, Chapter 73 of the Rhode Island General Laws. The Child Advocate's Office is statutorily mandated to protect the civil, legal, and special rights of all children involved with the Department of Children, Youth and Families (DCYF). The chief purpose of the office is to monitor DCYF to ensure that it offers children in its care adequate protection and quality services. The Office is empowered to take whatever action, including legislative advocacy and litigation to attack deficiencies and discrimination experienced by children in need of child welfare, correctional, and mental health services. The Office reviews family court orders, and investigates institutional abuse allegations and the circumstances relating to the death of any child who has received services from DCYF. The Office also has a cooperative agreement with the Rhode Island Department of Education to provide surrogate parent services to special needs children in the care of DCYF whose natural parents are unable to make educational decisions for them.

# OFFICE OF THE CHILD ADVOCATE



OFFICE OF THE CHILD ADVOCATE  
PERFORMANCE AUDIT

**STATUS OF PRIOR AUDIT RECOMMENDATIONS**

The following audit recommendations were identified in the report prepared by the Bureau of Audits for the fiscal year ended June 30, 1998.

**Monitoring Department of Children, Youth and Families (DCYF)**

1. The Office of the Child Advocate should establish a pro-active risk assessment protocol that would ensure DCYF internal policies and procedures are reviewed timely.

Implemented.

**Management Information System**

2. The information system should be devised to include policies and procedures that management has implemented to ensure that valid and reliable data are obtained, maintained and fairly disclosed in reports.

Not implemented. (See current year recommendation 1.)

**Case Files**

3. The billing process should be revised to ensure that managers maintain a schedule of billable cases submitted in summary form for processing.

Implemented.

4. Entries on the communication logs should be complete and include the reviewer's basis for conclusion and preparation of a formal report.

Implemented.

**Accounting Practices**

5. Reconcile accounts monthly to the state controller's statements.

Implemented.

OFFICE OF THE CHILD ADVOCATE  
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**FINDINGS AND RECOMMENDATIONS**

**Management Information System**

Several years ago, handicapped children and their advocates sued Rhode Island's Department of Education (RIDE) and the Department of Children, Youth and Families (DCYF). The suit sought to force RIDE and DCYF to establish a program to provide "surrogate parents" for special needs children in DCYF care whose natural parents were unable to provide guidance in planning and carrying out educational programs for these children. This litigation resulted in a consent decree requiring RIDE to implement a Surrogate Parent Program. The decree requires the parties to monitor, track, and assist surrogate parents via a management information system that includes computer entry of all pertinent data; logging of cases received; and changes, file maintenance, and retrieval and reporting. To this end, the Office of the Child Advocate entered into a cooperative agreement with RIDE to develop and implement the Educational Surrogate Parent Program.

Our review of the management information system within the Office of the Child Advocate disclosed control weaknesses in the information processing and reporting. The management information system developed and required by RIDE has not been capturing pertinent attributes since 1999; therefore, it is not adequately supporting the program. The status of the approximately 1,000 cases must be determined by a manual review. To fulfill compliance with the court order, manual records are tallied and compared to DCYF's database reports. A possible solution stems from the fact that DCYF is the common data source. Since DCYF is the source of the information, it would be prudent to match up with their software requirements and to explore developing and sharing a Child Advocate database.

Improvements in the information technology infrastructure and a common database with DCYF would also derive benefits in other Child Advocate activities. Improved attribute reporting could provide a link between case management files and Medicaid billing. Other benefits from a shared database could be in the area of night-to-night monitoring, facilities reviews, and investigations. For example, the Child Advocate receives a nonelectronic night-to-night report that cannot be analyzed before reentering the data into its database. And, facilities monitoring is also done nonelectronically. Placing these reviews on a system would provide the ability to analyze, minimize data entry, maintain histories, and provide reports.

**Recommendation**

1. Explore the feasibility of having an Information Technology needs assessment performed to assist in developing a management information system in conjunction with DCYF.

**Management's Response:** *Accepted*



## **Surrogate Parent Program**

The Office of the Child Advocate has not defined by policy “targeted case management services” in the Surrogate Parent Program. Case management services are billable to the Medicaid program at a rate of \$16.00 per 15-minute units. Presently, there is an inadequate link between the billings and the case management files. The case manager indicates on the case review form that the billing has been done and the file is current; however, there is no formal procedure in place to ensure management that the billing has actually been completed. Unless case managers document the last date of service and the actual billing dates, there is no way to ensure that all billing can be easily verified or that the entire population has been billed. Developing billing criteria and management service benchmarks would enhance operational effectiveness and supervisory reviews. These internal benchmarks with specific billing criteria would improve attribute reporting and could provide a link between the case management files and the Medicaid billings.

### **Recommendations**

2. Improve linkage between case management files and Medicaid billings.

**Management’s Response:** *Accepted*

3. Develop policy and procedures to define billing criteria and internal case management benchmarks.

**Management’s Response:** *Accepted*

## **Training**

Medicaid billings are processed via the National Electronic Claims Submission (NECS) claims entry software package developed by Electronic Data System (EDS). Our review of the software instructions suggests that there are features in the billing application which may provide reports and assist in minimizing data entry. One individual bills Medicaid on a part-time basis. This individual has received on-the-job-training and has not been taught all of the system’s features. Further review indicated that the personal computer used to bill Medicaid may have limited memory and this may prevent the use of all the reporting features; however, at the very least, training should be provided to cover the basic uses of the system and include those features that are compatible with the agency’s computer.

### **Recommendation**

4. Increase staff training for the EDS Medicaid billing system.

**Management’s Response:** *Accepted*

*State of Rhode Island and Providence Plantations*  
OFFICE OF THE CHILD ADVOCATE

Laureen D'Ambra, Esq.  
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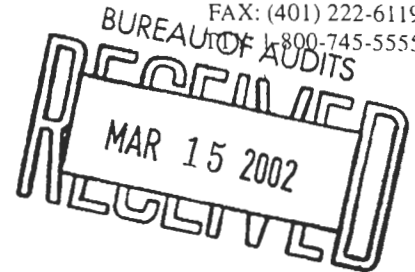
March 12, 2002

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Stephen M. Cooper, CGFM, Chief  
Department of Administration  
Bureau of Audits  
One Capitol Hill  
Providence, Rhode Island 02908

Dear Mr. Cooper:

*Stephen*

Pursuant to the recent performance audit of the Office of the Child Advocate and the recommendations conducted by your Agency, the following responses are hereby submitted:

Recommendations:

1. Explore the feasibility of having an Information Technology Needs Assessment performed to assist in developing a management information system in conjunction with DCYF.

**Office of the Child Advocate Reponse:** The OCA accepts this recommendation.

We accept the auditor's recommendation that we explore the feasibility of having a Information Technology Needs Assessment performed. We will contact DCYF to determine the feasibility of coordinating a management information system with them. Currently, we have two computers that are connected to the DCYF RICHIST System. This arrangement permits the Chief Field Investigator and the Senior Monitoring and Evaluation Specialist to access DCYF institutional abuse complaints, as well as e-mail to and from DCYF staff.

It should be noted that we agree the Special Education Program data system that was originally developed by the Rhode Island Department of Education (RIDE) is an antiquated system to compile relevant and necessary data. We started a process to develop a new system based on the previous audit that was conducted in 1999. We require technical assistance to merge the two programs and data entry of the current population served. A computer consultant would need to be hired to accomplish this goal. Monies for this expense are not budgeted.

2. Improve linkage between case management files and Medicaid billings.

**Office of the Child Advocate Response:** The OCA accepts this recommendation.

We are currently in the process of networking all of the computers in the Special Education Program. As part of the new networking system, we hope to also integrate into the network system the computer that is used for Medicaid billing. Hopefully, this will allow easier access to information required for Medicaid billing. The networking of the computers is being done at no cost to the Office through the kind assistance of an accounting company affiliated with the spouse of one of my employees.

3. Develop policy and procedures to define billing criteria and internal case management benchmarks.

**Office of the Child Advocate Response:** The OCA accepts this recommendation.

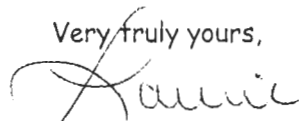
Previous memos to staff regarding Medicaid billing procedures have been incorporated into one "Reimbursement Procedure Memorandum" that has been distributed to staff, a copy of which is attached.

4. Increase staff training for the EDS Medicaid billing system.

**Office of the Child Advocate Response:** The OCA accepts this recommendation.

We accept the recommendation and have already taken steps to partially implement this recommendation. A new computer has been purchased to accommodate new software and training programs for Medicaid billing. The obsolete computer and out-dated software have been replaced per the recommendation of the auditor. We are in the process of setting up the new Medicaid billing program system on it.

As always, I appreciate the input and suggestions that this audit has provided to improve the activities of the Office of the Child Advocate. If you have any questions regarding my comments, please do not hesitate to call me.

Very truly yours,  
  
LAUREEN D'AMBRA, ESQUIRE  
Child Advocate

LD:abb